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A Program for the Identification and Remediation of Perceptual Deficiencies in Kindergarten and Primary Grade Students. Interim Progress Report.

Union Township Board of Education, N.J.
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Identifiers-Title III

Designed as a perceptual enrichment program for all kindergarten children, the project also emphasizes intensive perceptual training for children manifesting dificiency in this area of development. Screening was done of 869 pre-kindergarten children; those scoring in the lowest 5% on any one or more of the subtests or falling in the lowest 10% of the total scores were given training 4 days a week in groups of six. Children not receiving intensive training were given instruction on the 5th day. Training was in deficit modalities concomitant with reinforcement of the stronger modalities and included warm-up, form perception, and gross motor exercises. A weekly workshop was held for the perception teachers and inservice training provided for all kindergarten and primary teachers. Videotaping was also done. Parent and teacher reaction was favorable. Preliminary planning is outlined, and projected plans for the full 3 years of the study are detailed. An appendix lists the instruments used for screening, and the program of a Title III workshop is included. (JD)

ED026766

A PROGRAM FOR THE IDENTIFICATION AND REMEDIATION OF PERCEPTUAL DEFICIENCIES IN KINDERGARTEN AND PRIMARY GRADE STUDENTS

Board Of Education, Union, New Jersey

EC02 910

A PROGRAM FOR THE IDENTIFICATION AND REMEDIATION OF PERCEPTUAL DEFICIENCIES IN KINDERGARTEN AND PRIMARY GRADE STUDENTS

U.S. DEPARTMENT OF HEALTH, EDUCATION & WELFARE
OFFICE OF EDUCATION

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I N T E R I M P R O G R E S S R E P O R T

Title III Grant No. OEG. 3-7-703564-4312

Submitted By: Union Township Board of Education
Union, New Jersey 07083
Phone: 201 - 688-1200

April 1968

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Observing a Child Using the Swedish Puzzles.

PREFACE

A *Statement of Purpose:*

The human being is a complex organism, having the capacity to adapt to, function within, and in many ways control a constantly changing environment. He accomplishes this through a sequential learning process requiring sensory-motor experiences, thus permitting the individual to react to, assimilate and interpret information about his external environment. Thus, learning starts at birth, (if not in utero) and is a continuous, dynamic process. It occurs when the infant feels comfort or discomfort, when he moves or immobilizes different parts of his body, when he tastes food or smells aromas, when he is exposed to various kinds and intensities of sound, when he sees light and shadows, etc.

The opportunity for learning is increased when the child can maneuver about. In this way, he is learning to coordinate different parts of his body more efficiently; he learns to judge distances and space, size and proportions, balance and counterbalance, direction and counterdirection. Indeed, he develops percepts and concepts by tasting, smelling, feeling, "weighing" (heft), manipulating,

maneuvering, listening and seeing - i.e., by responding to environmental stimuli, whether they be animate or inanimate objects. Thus much of learning in the formative years is experiential, adaptive and sequential.

Now it is assumed that when a child is chronologically six years of age, he is ready for a structured, formal learning program heavily weighted in symbolic language. It isn't until some youngsters manifest learning problems, however, that we identify them as "not ready" for that level of academic achievement. Some children experience difficulties because of neurological impairment, mental retardation, emotional involvement, physical handicaps or any combination of these factors. It appears that others seem to have had inadequate experiential learning in their preschool years, so that they lack the perceptual orientation for symbolic learning, as required in reading and arithmetic. Let us take, for example, some of the skills required to write the letter "S". First of all, the child must be able to sustain a sitting posture and concentrate on the task at hand, ignoring distracting stimuli, such as other visual

stimuli, "background noise", visceral sensations, etc. He must be able to innervate specific body muscles in order to manipulate a pencil. Next, he must be capable of executing a circular movement in a counterclockwise direction, then reverse direction, going into a circular clockwise direction, and then stop at a given point. This involves eye-hand coordination, left-right as well as top-bottom orientation. If he is copying it from the blackboard, he must be capable of far to near visual accommodation; on the other hand, if he if responding to the teacher's dictating the letter, he must be able to translate an auditory stimulus to a motor response, thus in turn involving auditory decoding, auditory and visual retention, associative processes, and neuromuscular control.

Now we can anticipate learning problems for the first grader who has a developmental lag in any area of perception, (i.e. gustatory, olfactory, tactile, kinesthetic, auditory and visual), or for the youngster who appears to have adequately functioning sensory channels but who has not learned to integrate and synchronize these modalities or systems so that he can function efficiently. The

Preface

purpose of our project, then, is to provide a perceptual enrichment program for all kindergarten children, with emphasis on intensive, perceptual training for those youngsters who manifest a deficiency in this area of development. It is an attempt to fill in sequential gaps in early childhood developmental learning.

Swedish Formboards.

INTRODUCTION

On January 10, 1966 the Union Township Board of Education submitted a proposal to the United States Office of Education for a planning grant to investigate the feasibility of implementing a perceptual training program for the diagnosis, prevention, and remediation of learning disabilities. Our planning grant was funded for the academic year 1966-1967, during which time extensive planning and preparation went into the construction of the project design. This was carried out under the direction of Mrs. Jane Padalino, Psychologist, who over a number of years had acquired a background in the diagnosis and remediation of perceptual deficits. Planning the project design involved such dimensions as:

1. Research of the literature.
2. Attending Workshops, Conventions, and Meetings including:
   a. The Gesell Institute for Child Development, New Haven, Conn.
   b. New York University; Department of Psychiatry and Neurology.
   c. Cerebral Palsy Pre-School Unit of the New Jersey Orthopedic Hospital of Orange, New Jersey.

d. Montgomery County Schools, Maryland.

e. Workshop conducted by Dr. Marianne Frostig.

3. Conferring with prominent personalities in the fields of Education, Medicine, and Psychology:

a. Dr. Newell Kephart of Purdue University.

b. Mrs. Elizabeth Freidus of Columbia University.

c. Dr. Illg of Gesell Institute, New Haven, Connecticut.

d. Dr. Harry V. Bice and Mrs. Marie Nicholas of the Cerebral Palsy Unit, New Jersey Orthopedic Hospital, et al.

4. Study under Dr. Elizabeth Freidus of Columbia University,prominent educator in the field of Learning Disabilities.

5. Conducting a pilot study to test screening instruments, equipment, and the mechanics of the operational phases of the program.

On the basis of the above planning and study, an operational grant proposal was submitted to the United States Office of Education on January 15, 1967. The proposal was approved and funded on June 15, 1967.

RATIONALE

Common sense dictates the practicality of identifying and remediating learning disabilities as early in a child's life as possible. It was, therefore, determined that our program would be one of "prevention", with emphasis on helping the kindergarten child manifesting a perceptual deficit to develop each sensory channel or modality so that he can adequately process, integrate, and interpret information in his environment. This appears to be fundamental to preparing him for the academic curriculum, which is heavily weighted in the interpretation of auditory and visual stimuli.

Moreover, adequately functioning sensory channels make the child better equipped to focus and direct his attention so that he is not unduly distracted by extraneous environmental stimuli. Thus, through a multi-modality, inter-modality approach we hope to train the child to focus and direct his attention, to problem-solve, and to become organized and self-directed.

A Technique to Develop
Laterality and Balance.

PROGRAM OBJECTIVES

Program objectives as outlined in the proposal are as follows:

I. Identify all incoming kindergarten children who have a perceptual deficit.

II. Provide a structured program of perceptual training to all kindergarten and primary grade students.

III. Provide in-service training for all kindergarten and primary grade teachers both public and non-public in the methods and techniques of perceptual training.

IV. Provide a library of video tapes and material for study and dissemination directly and through the Regional Educational Laboratory in Philadelphia and the Clearing House for ERIC in Washington, D. C.

PROGRESS REPORT ON EACH OF THE OBJECTIVES LISTED ABOVE

I. Identify all pre-kindergarten children who have a perceptual deficit.

A. The Screening Process.

As outlined in the proposal, incoming kindergarten children residing in Union, New Jersey were screened for perceptual deficits during the summer testing program which started on June 27, 1967 and ran through August 15, 1967. Included in the screening were all public school children as well as those who expected to attend parochial schools and the Campus School of Newark State College, Union, New Jersey.

It was determined to establish a control group in a neighboring community. Children from the Town of Summit, New Jersey were screened with the same instruments.

The children in both the Union and Summit School Systems were tested in the areas of Postural-Transport Orientations (Gross-Motor Coordination), Auditory Dynamics, Associative Processes, and Perceptual-Motor Match. These children were

Gross Motor Testing with Balance Board.

also tested for auditory ard visual acuity, as well as for eye muscle imbalance. These latter findings were not used for the purpose of selecting children for intensive perceptual training.

Four children were screened per hour, each spending approximately fifteen minutes at each of the four stations. Each perception teacher was permanently assigned to a station and administered the same part of the test battery to all of the children.

From September 12 through September 20, 1967 an additional 145 children were screened in Union and Summit. This included new entrants and absentees, making a total number of children screened as follows:

Union	729
St. Joseph's, Maplewood	33
St. Paul's, Irvington	8*
Campus School	22
Roosevelt and Jefferson Schools, Summit	77
Total Screened	869

*St. Paul's, Irvington has only eight Union residents in its kindergarten.

Children screened during the summer were accompanied by their mothers, who utilized the hour in the following ways:

1. Viewing a video-tape demonstration of perceptual training techniques by Mrs. Freidus of Columbia University. This tape was made in Washington School during the Spring of 1967.
2. Filling out an interview form regarding their socio-economic status, and the experiential opportunities and experiences of the child.
3. Being interviewed by a Psychologist, Mrs. Gwendolyn Scott, with respect to the birth and developmental histories of the children.

B. Selection of Children for Intensive Perceptual Training:

The facilities of Seton Hall University's Computer Center were used to compute the scores and select children. It was determined to give a program of intensive perceptual training to those kindergarten children in Union (including

Workshop by Mrs. Freidus from Columbia University.

parochial schools and the Campus School) who scored in the lowest 5% of any one or more of the subtests, as well as to those who fell in the lowest 10% of the total scores.

The following is a statistical breakdown by school of the number of children receiving intensive perceptual training, as determined by the aforementioned method of selections:

Livingston School	32
St. Joseph's School *	4
Jefferson School	28
Washington School	33
Franklin School	25
Hamilton School	6
Battle Hill School	29
Connecticut Farms School	29
Total	186

This total of 186 represents twenty-four percent of the kindergarten population.

*The two largest parochial schools in Union, New Jersey, St.Michael's and Holy Spirit, do not operate kindergartens. In the Fall of 1968 perceptual training will be given to the first graders who transfer from the public schools while still evidencing a perceptual deficit.

C. During the month of November the following additional tests were administered to children in the intensive training program, and to a sampling of children with comparable scores in the Summit, New Jersey control group.

Wechsler Preschool and Primary Scale of Intelligence

Bender-Gestalt

Union 25

Perception Teacher
Holding Parent Conference.

II. Provide a Structured Program of Perceptual Training to all Kindergarten and Primary Grade Students.

A. Training Procedures.

Four days a week the children identified as having a perceptual deficiency are taken out of the kindergarten room for perceptual training in groups of six. On the fifth school day, the perception teacher gives demonstration lessons in the kindergarten class, or she takes, in groups of six, all the children in each class who are not receiving intensive training. Thus, over 800 children are involved in the perceptual enrichment program.

Training procedures embrace the philosophies and techniques of some of the foremost child study specialists in the fields of Psychology, Education, and Physical Therapy. (Kephart, Barsch, Cruickshank, Freidus, Gesell, Bice, Ayres, et al.) Thus, ours is an eclectic approach with training in deficit modalities concomitant with reinforcement of the

Part of an Obstacle Course Involving Experimentation in Body Movement and Sequencing.

stronger modalities. These techniques, then, are structured to sharpen all the sensory channels: the gustatory, olfactory, tactile, kinesthetic, auditory, and visual. Emphasis is placed on child-centered learning through diagnostic teaching. Thus, to recapitulate, through a multi-modality and intermodality approach to learning, the child is trained to focus and direct his attention, to problem-solve, and to become organized and self-directed. Listed below are two sample lesson plans:

1. Plan I:

   a. Five minute warm-up exercises to develop muscle strength and flexibility and to stimulate the cortex, thus, purportedly making the child receptive to training in form perception. Counts per exercise are progressively increased.

      (1) Toe Touching - 3 counts:

          Stand erect, feet 12 inches apart, arms overhead.

Bend forward to touch floor between feet.

(2) Arm Circling - 10 counts:

Make large circles with both arms. Half count forward, half backward.

(3) Lateral Bending - 3 counts:

Bend sidewards from waist to left. Return to starting position and repeat to right. Bends to left and right count one.

(4) Hopping:

Left foot - 5 counts; Right foot - 5 counts; Both feet - 3 counts.

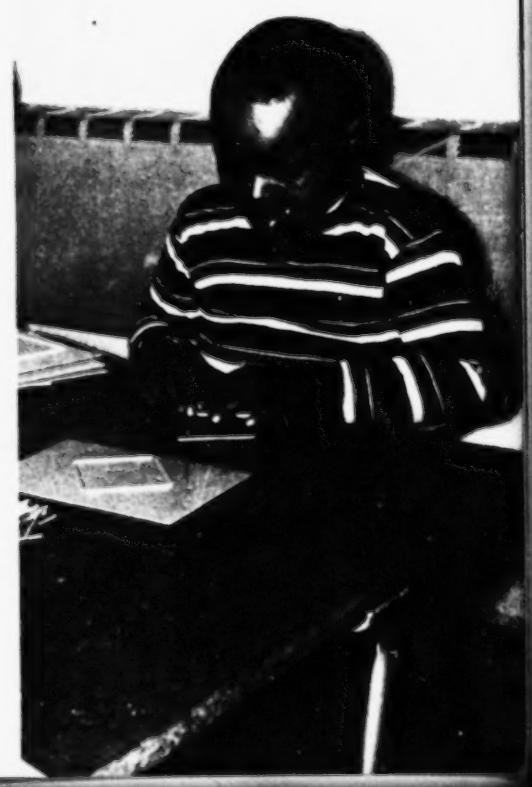
b. Form Perception:

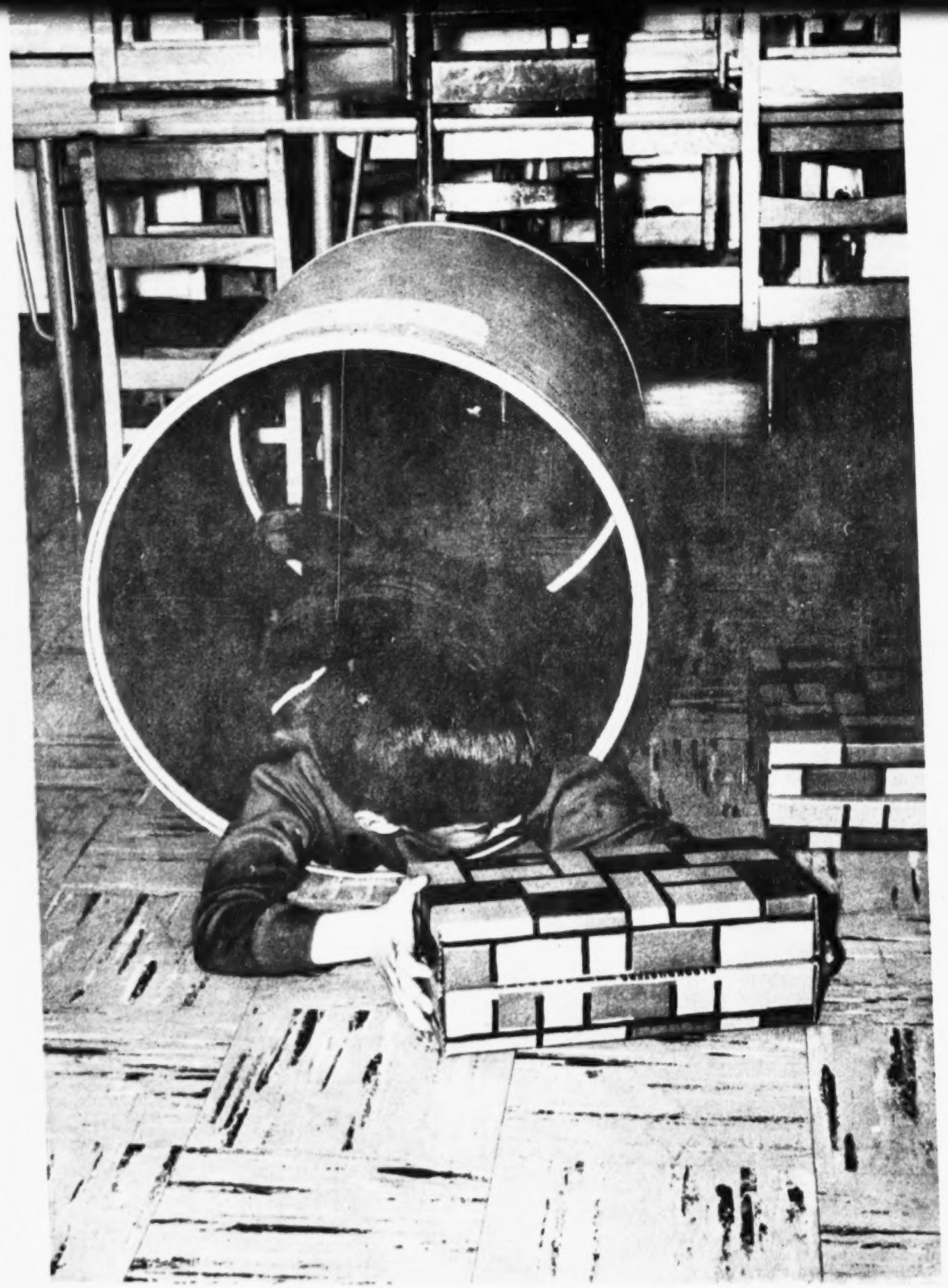
Children copy designs from paper to pegboard, e.g., rectangle with two vertical lines in red and two horizontal lines in yellow.

c. Gross Motor:

Obstacle Course (concomitantly verbalizing the concepts of "under", "over", and "between").

Reproducing Kephart's Stick Designs.





The Use of Large Muscles
in Manipulating
a Foreign Object.

(1) Jump the brook

(2) Balance beam (2) (walk)

(3) Follow path of rope

(4) Run between pins (zig-zag)

(5) Climb under rope (knee high)

(6) Jump over blocks (low)

2. Plan II:

a. Five minute warm-ups as mentioned under Plan I.

b. Form Perception:

Assorted parquetry designs, level depending upon the ability of the youngster. During this activity the teacher takes one child at a time to the blackboard. To the beat of a metronome the child points alternately with his finger (later with a pointer) to two colored dots. This is done on the horizontal, vertical, and diagonal axes.

c. Gross Motor:

Walking on "stilts" (made of juice cans and rope) to develop laterality.

B. Curriculum Development:

Mrs. Padalino, Project Director, is responsible for establishing the research design of the overall project, selection and profiling of screening instruments, curriculum development and coordination, instructional supervision, and preparation of all publications. She conducts a weekly workshop attended by the six perception teachers, whose professional backgrounds are diversified. Thus, each teacher contributes to the program a dimension which is essential to perceptual training, i.e., remedial physical education, special education, remediation, kindergarten and early elementary education.

The project director and perception teachers have been keeping pace with the latest developments in training and

remediation techniques by attending lectures and making visitations to institutions and clinics, some of which are listed below:

1. International Association of Children with Learning Disabilities, New York and Boston.
2. Meeting of the International Reading Teachers Association.
3. New Jersey Teachers Convention.
4. Conference of New York Optometric Association.
5. Visitation to the Gateway School, Dr. Elizabeth Freidus, Director.
6. Conference on Brain Injury and Perceptual Training at the Middlesex Mental Health Clinic. (At this meeting Mrs. Padalino presented an overview of the project. Staff members of three clinics and two school districts attended.)
7. Visitation to the New York Optometric Association.

Orientation for Graduate Class in Learning Disabilities, Newark State College.

III. Provide In-Service Training for all Kindergarten and Primary Grade Teachers both Public and Non-Public in the Methods and Techniques of Perceptual Training.

A. In-service training for public and parochial kindergarten and primary grade teachers was initiated during the early Spring of last year. Meetings were held with the kindergarten teachers for general orientation purposes and to exchange ideas regarding the program.

B. A series of lectures and demonstrations was given by prominent people in fields related to perceptual development and training. These included the following:

1. Dr. Catherine Spears, Neurologist.
2. Dr. Solan, Optometrist
3. Dr. Elizabeth Freidus, Educator

These lectures were opened to all teachers throughout the school system.

C. Perception teachers confer frequently with kindergarten teachers in their respective buildings. They share and demonstrate techniques on a weekly basis.

County Supervisors Discussing the Observation of a Lesson.

Information related to the various phases of our program by no means has been restricted to kindergarten and primary grade teachers. Such information has already been disseminated to various professional and lay groups throughout the school system, the Community and the State.

A. Perception teachers have held faculty and P.T.A. meetings in their respective schools. These included a lecture in perceptual development as well as a demonstration of remedial techniques.

B. A copy of the project proposal, books and periodicals have been made available to teachers throughout the school system.

C. Mrs. Padalino met with the nurses and speech teachers, at which time they were given an overview of the program and provided with a read-out from the computer of the test results in the areas of speech, auditory and visual acuity, and muscular imbalance.

D. Techniques and printed materials are made available to the learning disability specialists by the perception teachers and project director.

E. Included in the program are children in classes for the mentally retarded, the neurologically impaired and the emotionally disturbed and socially maladjusted. Gross-motor training techniques have been made available by Miss Gutowski, perception training specialist, to the physical education instructor who works with these children. The perception teachers work closely with individual children and confer regularly with the classroom teachers.

F. Personnel from school systems participating as control groups have been oriented to the nature and scope of the program They have observed screening procedures and training sessions.

G. Externs in psychology and graduate students in Education and Special Education have participated in various phases of the program. They have found the experience has contributed

to their background in learning disabilities.

H. Arrangements have been already been made by three local colleges to have graduate students observe our Wednesday workshops and/or view our video tapes.

I. Miss Bjorlingsson, perception teacher, has demonstrated the administration of the ITPA and related training techniques to the New Jersey Association of School Psychologists as well as to the faculty of the Montvale School System, Montvale, New Jersey.

J. Dr. James M. Caulfield, Executive Director, met with the Superintendents of Schools in Union County to explain the nature and scope of our program. His presentation was followed by a viewing on video-tape of our screening procedures and training techniques. Copies of our project proposals were also made available to them.

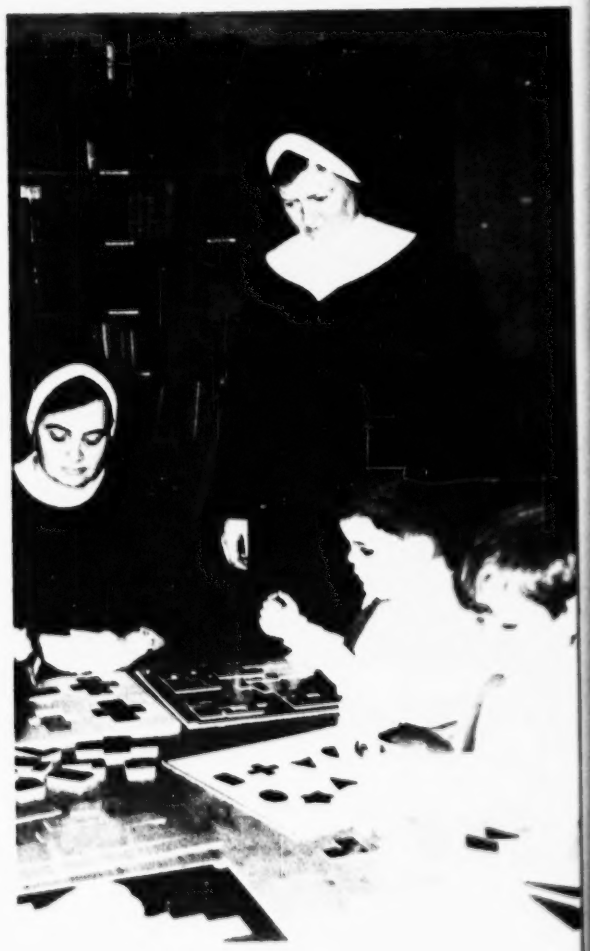
K. Visitors including administrators, psychologists, learning disability specialists, curriculum coordinators, social

workers, teachers, and externs in psychology have seen our program in action. We have shared techniques and information regarding resources for equipment with personnel from other school districts, some from States other than New Jersey, thus, disseminating information far beyond boundaries of our Community.

L. Local and metropolitan newspapers have periodically published articles about our program, thus, keeping the professional and lay public informed as to the objectives and progress of our project.

M. Plans are already underway for a Spring in-service training program for public and parochial school teachers. This will include special guest lecturers, lectures by the project director, and demonstrations on video-tape. Special guest lectures will be opened to personnel from other school systems.

Formboards: St. Joseph's Parochial School.



N. The project directors have already addressed other organizations which have expressed an interest in the program,e.g.,

1. The Middlesex County Mental Health Clinic.
2. The Suburban Women's Club.
3. The New Jersey Association for Brain Injured Children.
4. The Future Teachers of America Club, Union High School, Union, New Jersey.

O. Information regarding our program has been requested by educational agencies and centers throughout the Country. This brochure and subsequent reports will be disseminated throughout the Country to those on our mailing list. Copies will also be available to any interested person upon request in writing.

Representative from United States Department of Education Observing a Technique in Color Discrimination.

IV. Provide a Library of Video Tapes and Material for Study and Dissemination Directly and Through the Regional Educational Laboratory in Philadelphia and the Clearing House for ERIC in Washington, D. C.

Video-taping is already emerging as a medium which is essential to the widespread effectiveness of our program and to the perpetuation of exemplary techniques and methods by "masters" in the field of Education. An example of the latter is a demonstration of a lesson by Mrs. Elizabeth Freidus with our of our kindergarten classes. We have also taped our screening procedures and lessons with our perception classes. The latter include a running commentary by the project director and have been followed by a discussion on the rationale for the techniques used.

Our video-tapes have already been requested by colleges and educational centers. The video-tapes can be used with any model of the Ampex Recorder.

Orientation for Parents of Incoming Kindergarten Class.

Use of the German Stretch Rope to Exercise Upper Torso and to Develop the Concepts of Up and Down.

SUBJECTIVE EVALUATION

I. PARENT REACTION:

The cooperation received from the parents of the children was beyond our greatest expectations. We did prepare the public through newspaper articles. The P.T.A. Council of one of the schools was consulted with respect to a form letter, which was mailed to each home. This was followed by a home telephone call for the purpose of setting up an appointment for screening the child. The parents were receptive to the concept of the program, kept their appointments and were most cooperative with respect to filling out the questionnaire and answering relatively delicate questions on the interview conducted by a psychologist. The same level of cooperation has been evidenced during the training phase of the program.

The local Suburban Women's Club has volunteered to make supplies which cannot be purchased and which could be most helpful in the training process. A representative has met with one of our teachers on several occasions, so that the construction of materials is now underway.

II. TEACHER REACTION:

Mr. Robert Laib, our Kindergarten Curriculum Coordinator, and our kindergarter staff are to be commended for the role they have played in making this program possible. They have attended meetings, offered very constructive suggestions and have, without exception, cooperated in every way to help make the program run smoothly.

Swedish Formboards.
Color Cylinders and Formboards.

PROJECTED PLANS

I. Since our program is scheduled to extend over a three year period, the following studies are anticipated:

A. A comparison of experimental, control and Hawthorne groups.

B. A comparison of retest scores on involved children according to the areas of deficit.

C. A comparison of groups trained with and without gross motor activities.

D. A longitudinal study of the progress of the same student in his kindergarten, first and second years of school.

E. A comparison of the children in the program with those in the class immediately preceeding them on such tests as the Metropolitan Readiness Test (Kdgn.), the Lorge Thorndike Intelligence Test (Grades 1,3,5,7,10), The Gates MacGinitie Reading Test (Grade 2).

F. Comparison of the results of psychological evaluations (pre and post testing) on the WPSSI and WISC.

II. A curriculum guide is evolving from the weekly workshops run by the project director. It will be comprehensive with respect to training techniques, methodology, and materials for servicing each deficit area.

III. Other project outgrowths of the program include rating forms and screening devices for children in kindergarten and the primary grades.

IV. Of additional significant value will be the early identification of children with learning disabilities, which is already becoming evident. A number of youngsters have had neurological, opthalmological, psychiatric and/or orthopedic evaluations as a result of early diagnostic techniques followed up with parent conferences. Also, referrals of kindergarten children have been made for the first time to our remedial physical education specialists.

Group counseling for parents if projected for the near future.

VI. We are anticipating numerous requests for project results by professional and lay groups. Thus, dissemination of information through the media of video tapes, lectures and workshops is expected to continue over a period of time.

Swedish Formboards.

Answers to the more salient questions of the interview and questionnaire were tabulated on the children who fell in the lowest, middle and highest ten per cent of the total kindergarten population tested in the Union School System.* In viewing the above data, the following observations were made:

1. More than half the children who scored in the lowest ten per cent are in the youngest age group.
2. More boys tested low than girls. Of the 188 children in the program 127 are boys and 61 are girls.
3. More children who scored in the lowest ten per cent come from homes where the head of the family is a skilled worker; more children in the middle ten per cent group came from families in which the principle wage earner is a clerk, service worker, or semi-professional; there are more children of professional parents in

* *One should keep in mind the subjectivity of the data. Obviously some parents are guarded with respect to releasing information which they feel may "label" a youngster so early in his "academic life", despite our reassurance regarding the confidentiality of the interview. It might be interesting to reinterview some parents at a later time and compare the data.*

the highest ten per cent than in either of the other two groups.

4. There seems to be a significant relationship between the degree of "involvement" and experiential activities and opportunities.
5. More of the "involved" children appear to have had two or more complications during the post-natal period of their development.
6. Children who scored in the lowest ten per cent talked relatively later than those who fell in the middle or highest ten per cent of the population.
7. Those more "involved" children manifest a higher incidence of emotional and/or social mannerisms associated with adjustment problems.
8. There seems to be a positive correlation between total test scores and "attitude" ratings assessed by the examiners.

It is anticipated that the above, as well as additional data on the entire kindergarten population, will be correlated with test results and summarized in our second annual report.

Identifying Sounds.

APPENDIX

Instruments used for screening incoming kindergarten children:

I. Perceptual Motor Match

A. Simkov Perceptual Organization Inventory.

Published by Antof Educational Supplies, Medina, Ohio.

B. Goodenough-Harris Draw-A-Man.

Published by Harcourt, Brace, World, Inc., New York, New York.

C. Additional Geometric Forms.

II. Auditory Recall and Discrimination:

A. ITPA Auditory Vocal Sequencing Test.

B. Informal Clapping Patterns.

III. Concepts:

A. ITPA Auditory Vocal Association Test.

B. Simple Improvised Commands.

IV. Gross Motor Orientation - Purdue Perceptual Motor Survey:

A. Walking Boards F, B, S.

B. Body Identification.

C. Kraus-Weber.

D. Angels in the Snow.

TITLE III WORKSHOP

A five session workshop on Percention and related areas will be held in the auditorium of Washington School. The programs will be of special interest to kindergarten, primary grade, and Special Services personnel.

I. Thursday, April 25th - 3:30-5:00 p.m.:

Two films on "Movement Generalization" from Purdue University's Achievement Center. While related to brain injury they have a broader application.

II. Thursday, May 2nd - 3:30-5:00 p.m.:

Dr. George Early from Dr. Kephart's staff at Purdue University will speak on "Perceptual Deficits, Identification, and Remediation".

III. Thursday, May 16th - 3:30-5:00 p.m.:

Dr. Clyde Gillespie from the Gesell Institute of Child Development will speak on "Developmental Placement".

IV. Thursday, May 23rd - 3:30-5:00 p.m.:

Mrs. Eleanor Messing, from the staff of Dr. Ray Barsch, will speak on "Learning Disabilities and the Movigenic Curriculum".

V. Thursday, June 6th - 3:30-5:00 p.m.:

Dr. Charles Drake, Education Director, Reading Research Institute, Wellesley, Massachusetts, will speak on "Language Disabilities".

ACKNOWLEDGEMENTS

Special thanks go to the administrative, special services, and teaching personnel of the Summit, New Jersey School System for their willingness to serve as the control school system for this project.

Thanks also go to the Hillside, New Jersey School System for their cooperation.

TERM USED:

"Postural-Transport Orientations" - Barsch, 1965.

STAFF MEMBERS

PERCEPTION TEACHERS

Miss Elaine Bjorlingsson	Washington School
Miss Maureen Callahan	Jefferson School
Miss Diane Gerson	Connecticut Farms School
Miss Geraldine Gutowski	Livingston School
Mrs. Estelle Monestersky	Battle Hill School
	Hamilton School
Mrs. Miriam Novick	Franklin School
	St. Joseph's School

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Mrs. Jane P. Padalino, Psychologist